

# PROJECT 10073 RECORD

1. DATE - TIME GROUP 25 October 66 26/0045Z	2. LOCATION Bellbrook, Ohio (2 Witnesses)
3. SOURCE Civilian	10. CONCLUSION Possible (AIRCRAFT) ✓ <i>[Signature]</i>
4. NUMBER OF OBJECTS One	
5. LENGTH OF OBSERVATION 10 Minutes	11. BRIEF SUMMARY AND ANALYSIS Observers noted a red, blue green lights on an object that traveled toward the SW. Object was compared to a bright light in a form of a star that was moving as if it was surveying the ground below. At one time it appeared that the object stopped and made a circle.
6. TYPE OF OBSERVATION Ground-Visual	
7. COURSE SW	
8. PHOTOS <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
9. PHYSICAL EVIDENCE <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	



# U.S. AIR FORCE TECHNICAL INFORMATION

This questionnaire has been prepared so that you can give the U.S. Air Force as much information as possible concerning the unidentified aerial phenomenon that you have observed. Please try to answer as many questions as you possibly can. The information that you give will be used for research purposes. Your name will *not* be used in connection with any statements, conclusions, or publications without your permission. We request this personal information so that if it is deemed necessary, we may contact you for further details.

1. When did you see the object?

25 10 66  
Day Month Year

2. Time of day:

7 45  
Hour Minutes

(Circle One): A.M. or P.M.

3. Time Zone:

(Circle One): a. Eastern  
b. Central  
c. Mountain  
d. Pacific  
e. Other \_\_\_\_\_

(Circle One): a. Daylight Saving  
b. Standard

4. Where were you when you saw the object?

[REDACTED]  
Nearest Postal Address

Bellbrook  
City or Town

OHIO GREENE Co  
State or County

5. How long was object in sight? (Total Duration)

0 10 0  
Hours Minutes Seconds

a. Certain  
b. Fairly certain

c. Not very sure  
d. Just a guess

5.1 How was time in sight determined?

Radar watch

5.2 Was object in sight continuously?

Yes \_\_\_\_\_ No ✓

6. What was the condition of the sky?

DAY  
a. Bright  
b. Cloudy

NIGHT  
a. Bright  
b. Cloudy

7. IF you saw the object during DAYLIGHT, where was the SUN located as you looked at the object?

(Circle One): a. In front of you  
b. In back of you  
c. To your right

d. To your left  
e. Overhead  
f. Don't remember



20. Do you think you can estimate the speed of the object?

(Circle One)

☒ Yes

☐ No

IF you answered YES, then what speed would you estimate? 50-100 mph

21. Do you think you can estimate how far away from you the object was?

(Circle One)

☐ Yes

☒ No

IF you answered YES, then how far away would you say it was? \_\_\_\_\_

22. Where were you located when you saw the object?

(Circle One):

a. Inside a building

b. In a car

☒ c. Outdoors

d. In an airplane (type)

e. At sea

f. Other \_\_\_\_\_

23. Were you (Circle One)

a. In the business section of a city?

☒ b. In the residential section of a city?

c. In open countryside?

d. Near an airfield?

e. Flying over a city?

f. Flying over open country?

g. Other \_\_\_\_\_

24. IF you were MOVING IN AN AUTOMOBILE or other vehicle at the time, then complete the following questions:

24.1 What direction were you moving? (Circle One)

a. North

c. East

e. South

g. West

b. Northeast

d. Southeast

f. Southwest

h. Northwest

24.2 How fast were you moving? \_\_\_\_\_ miles per hour.

24.3 Did you stop at any time while you were looking at the object?

(Circle One)

☐ Yes

☐ No

25. Did you observe the object through any of the following?

a. Eyeglasses

☒ Yes

☐ No

e. Binoculars

☐ Yes

☒ No

b. Sun glasses

☐ Yes

☒ No

f. Telescope

☐ Yes

☒ No

c. Windshield

☐ Yes

☒ No

g. Theodolite

☐ Yes

☒ No

d. Window glass

☐ Yes

☒ No

h. Other \_\_\_\_\_

26. In order that you can give as clear a picture as possible of what you saw, describe in your own words a common object or objects which, when placed up in the sky, would give the same appearance as the object which you saw.

*a bright light in a form of a star moving as if it were surveying the ground below.*



14. Did the object disappear while you were watching it? If so, how?

yes. Vanished into nowhere.

15. Did the object move behind something at any time, particularly a cloud?

(Circle One):

Yes

☒ No

Don't Know.

IF you answered YES, then tell what

it moved behind: \_\_\_\_\_

16. Did the object move in front of something at any time, particularly a cloud?

(Circle One):

Yes

☒ No

Don't Know.

IF you answered YES, then tell what

in front of: \_\_\_\_\_

17. Tell in a few words the following things about the object:

a. Sound

No sound

b. Color

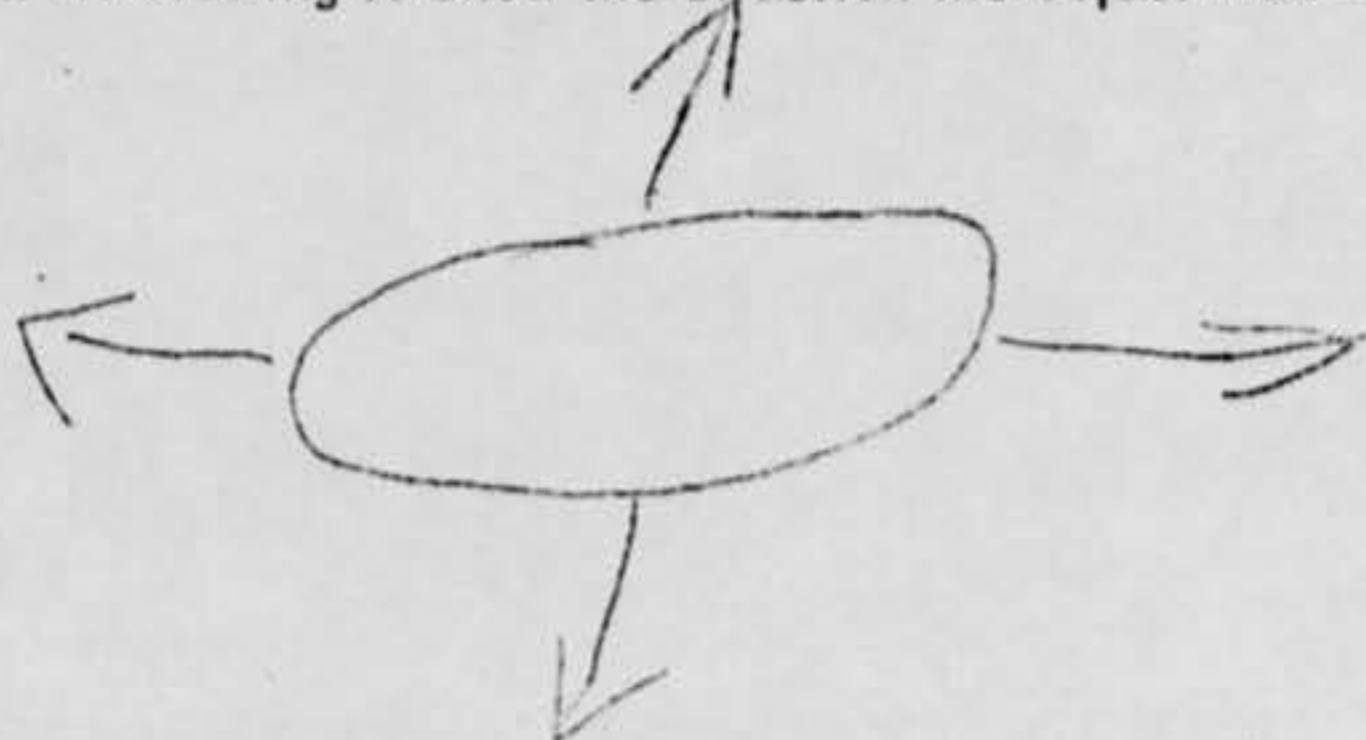
changed from red to white.

18. We wish to know the angular size. Hold a match stick at arm's length in line with a known object and note how much of the object is covered by the head of the match. If you had performed this experiment at the time of the sighting, how much of the object would have been covered by the match head?

about  $\frac{3}{4}$  of it.

19. Draw a picture that will show the shape of the object or objects. Label and include in your sketch any details of the object that you saw such as wings, protrusions, etc., and especially exhaust trails or vapor trails.

Place an arrow beside the drawing to show the direction the object was moving.





30. Have you ever seen this, or a similar object before. If so give date or dates and location.

No.

31. Was anyone else with you at the time you saw the object? (Circle One)

Yes

No

31.1 IF you answered YES, did they see the object too? (Circle One)

Yes

No

31.2 Please list their names and addresses:

[REDACTED]  
[REDACTED]

BELLBROOK, OHIO  
#45305 ZIP CODE

32. Please give the following information about yourself:

NAME

Last Name

First Name

Middle Name

ADDRESS

Street

City

Zone

State

TELEPHONE NUMBER

AGE

SEX

Indicate any additional information about yourself, including any special experience, which might be pertinent.

33. When and to whom did you report that you had seen the object?

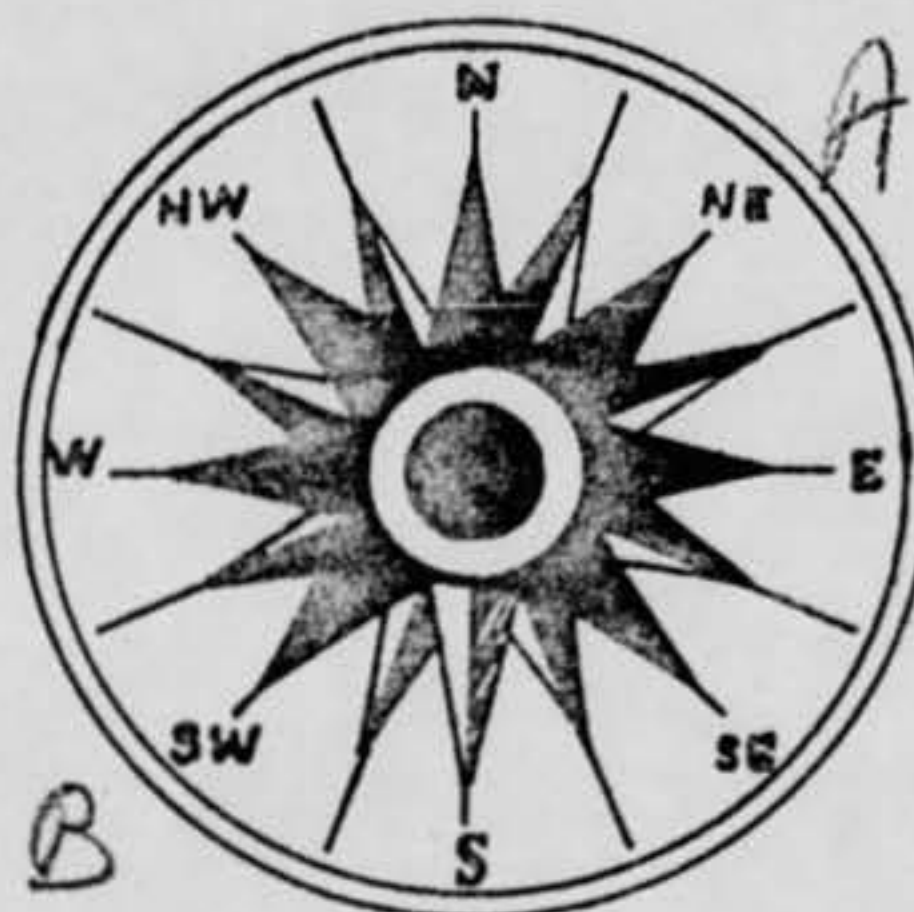
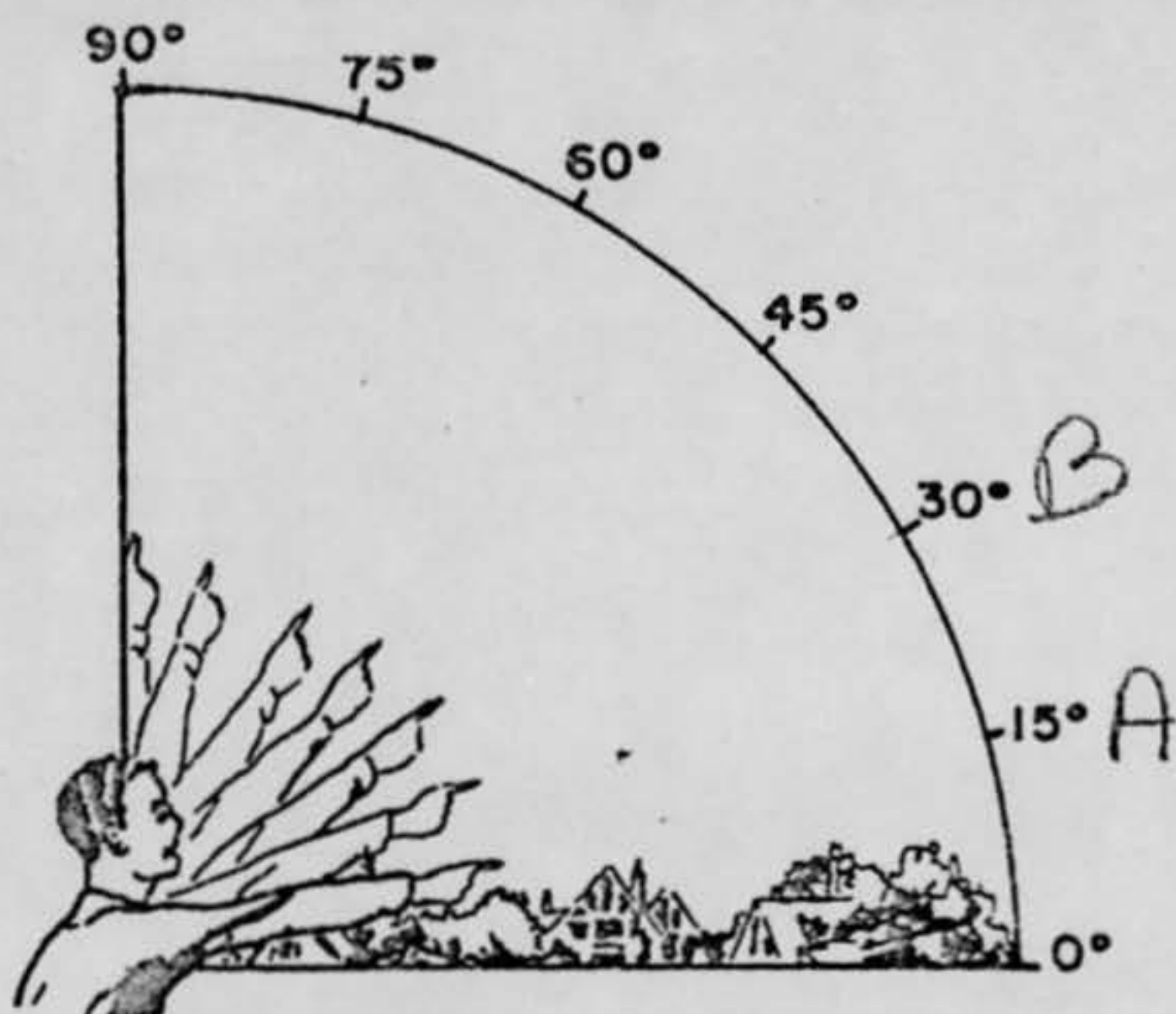
Day

Month

Year



27. In the following sketch, imagine that you are at the point shown. Place an "A" on the curved line to show how high the object was above the horizon (skyline) when you *first* saw it. Place a "B" on the same curved line to show how high the object was above the horizon (skyline) when you *last* saw it. Place an "A" on the compass when you *first* saw it. Place a "B" on the compass where you *last* saw the object.



28. Draw a picture that will show the motion that the object or objects made. Place an "A" at the beginning of the path, a "B" at the end of the path, and show any changes in direction during the course.



29. IF there was MORE THAN ONE object, then how many were there? ONLY ONE  
Draw a picture of how they were arranged, and put an arrow to show the direction that they were traveling.

34. Date you completed this questionnaire:

31 10 66  
Day Month Year

35. Information which you feel pertinent and which is not adequately covered in the specific points of the questionnaire or a narrative explanation of your sighting.

This object seemed to be surveying the residential area below. In the path it was moving it had to be operated by some form of intelligent.



# PROJECT 10073 RECORD

1. DATE - TIME GROUP 26 Oct 66 27/0100Z	2. LOCATION Bellbrook, Ohio	one
3. SOURCE Civilian	10. CONCLUSION Insufficient data	
4. NUMBER OF OBJECTS One	11. BRIEF SUMMARY AND ANALYSIS  Observer watched a UFO travel toward the SE. Observer was looking for a satellite and saw a UFO. The color was red then white then blue to green. Forms were sent but never received by this office.	
5. LENGTH OF OBSERVATION 10 minutes		
6. TYPE OF OBSERVATION Ground Visual		
7. COURSE SE		
8. PHOTOS <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
9. PHYSICAL EVIDENCE <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

FORM  
FTD SEP 63 0-329 (TDE) Previous editions of this form may be used.



*cruff data  
26 Oct 66*

*Bellbrook,  
Ohio*

Received telephone call from [REDACTED]  
Bellbrook, Ohio on 26 Oct 66. Last night he saw a UFO at 8pm  
going SE. He was looking for a satellite and saw a UFO. He watched  
it for ten minutes. Color was red then white then blue to green.  
His neighbor saw it to. Sgt Jones asked if he would complete a  
FTD Form 164, he replied yes so Sgt Jones said he would send two  
forms, one for himself and one for his neighbor.

FTD Forms 164 were sent on 27 Oct 66



8. IF you saw the object at NIGHT, what did you notice concerning the STARS and MOON?

8.1 STARS (Circle One):

- a. None
- b. A few
- ☒ c. Many
- d. Don't remember

8.2 MOON (Circle One):

- ☒ a. Bright moonlight
- b. Dull moonlight
- c. No moonlight - pitch dark
- d. Don't remember

9. What were the weather conditions at the time you saw the object?

CLOUDS (Circle One):

- ☒ a. Clear sky
- b. Hazy
- c. Scattered clouds
- d. Thick or heavy clouds

WEATHER (Circle One):

- ☒ a. Dry
- b. Fog, mist, or light rain
- c. Moderate or heavy rain
- d. Snow
- e. Don't remember

10. The object appeared: (Circle One):

- ☒ a. Solid
- b. Transparent
- c. Vapor
- d. As a light
- e. Don't remember

11. If it appeared as a light, was it brighter than the brightest stars? (Circle One):

- a. Brighter
- b. Dimmer
- c. About the same
- d. Don't know

11.1 Compare brightness to some common object:

12. The edges of the object were:

- (Circle One):
- a. Fuzzy or blurred
  - b. Like a bright star
  - ☒ c. Sharply outlined
  - d. Don't remember

e. Other \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

13. Did the object:

(Circle One for each question)

- a. Appear to stand still at any time?
- b. Suddenly speed up and rush away at any time?
- c. Break up into parts or explode?
- d. Give off smoke?
- e. Change brightness?
- f. Change shape?
- g. Flash or flicker?
- h. Disappear and reappear?

<input checked="" type="radio"/> Yes	<input type="radio"/> No	Don't know
<input type="radio"/> Yes	<input checked="" type="radio"/> No	Don't know
<input type="radio"/> Yes	<input checked="" type="radio"/> No	Don't know
<input type="radio"/> Yes	<input checked="" type="radio"/> No	Don't know
<input checked="" type="radio"/> Yes	<input type="radio"/> No	Don't know
<input type="radio"/> Yes	<input checked="" type="radio"/> No	Don't know
<input checked="" type="radio"/> Yes	<input type="radio"/> No	Don't know
<input type="radio"/> Yes	<input type="radio"/> No	Don't know



# U.S. AIR FORCE TECHNICAL INFORMATION

This questionnaire has been prepared so that you can give the U.S. Air Force as much information as possible concerning the unidentified aerial phenomenon that you have observed. Please try to answer as many questions as you possibly can. The information that you give will be used for research purposes. Your name will *not* be used in connection with any statements, conclusions, or publications without your permission. We request this personal information so that if it is deemed necessary, we may contact you for further details.

1. When did you see the object?

25 10 66  
Day Month Year

2. Time of day:

7 45  
Hour Minutes

(Circle One): A.M. or P.M.

3. Time Zone:

(Circle One): a. Eastern  
b. Central  
c. Mountain  
d. Pacific  
e. Other \_\_\_\_\_

(Circle One): a. Daylight Saving  
b. Standard

4. Where were you when you saw the object?

[REDACTED]

Nearest Postal Address

Brook

City or Town

Indiana, etc.

State or County

5. How long was object in sight? (Total Duration)

0 10 0  
Hours Minutes Seconds

a. Certain

b. Fairly certain

c. Not very sure

d. Just a guess

5.1 How was time in sight determined?

By a watch

5.2 Was object in sight continuously?

Yes \_\_\_\_\_ No \_\_\_\_\_

6. What was the condition of the sky?

DAY

a. Bright  
b. Cloudy

NIGHT

a. Bright  
b. Cloudy

7. IF you saw the object during DAYLIGHT, where was the SUN located as you looked at the object?

(Circle One): a. In front of you  
b. In back of you  
c. To your right

d. To your left  
e. Overhead  
f. Don't remember



20. Do you think you can estimate the speed of the object?

(Circle One)

☒ Yes

☐ No

IF you answered YES, then what speed would you estimate? 80-90 MPH.

21. Do you think you can estimate how far away from you the object was?

(Circle One)

☐ Yes

☒ No

IF you answered YES, then how far away would you say it was? \_\_\_\_\_

22. Where were you located when you saw the object?

(Circle One):

a. Inside a building

b. In a car

☒ c. Outdoors

d. In an airplane (type)

e. At sea

f. Other \_\_\_\_\_

23. Were you (Circle One)

a. In the business section of a city?

☒ b. In the residential section of a city?

c. In open countryside?

d. Near an airfield?

e. Flying over a city?

f. Flying over open country?

g. Other \_\_\_\_\_

24. IF you were MOVING IN AN AUTOMOBILE or other vehicle at the time, then complete the following questions:

24.1 What direction were you moving? (Circle One)

a. North

c. East

e. South

g. West

b. Northeast

d. Southeast

f. Southwest

h. Northwest

24.2 How fast were you moving? \_\_\_\_\_ miles per hour.

24.3 Did you stop at any time while you were looking at the object?

(Circle One)

☐ Yes

☐ No

25. Did you observe the object through any of the following?

a. Eyeglasses

Yes

☒ No

e. Binoculars

Yes

☒ No

b. Sun glasses

Yes

☒ No

f. Telescope

Yes

☒ No

c. Windshield

Yes

☒ No

g. Theodolite

Yes

☒ No

d. Window glass

Yes

☒ No

h. Other

Plain eyes

26. In order that you can give as clear a picture as possible of what you saw, describe in your own words a common object or objects which, when placed up in the sky, would give the same appearance as the object which you saw.

a flat square-like object. Circling the area we were in.



14. Did the object disappear while you were watching it? If so, how?

Yes. Vanish like a light turned off light

15. Did the object move behind something at any time, particularly a cloud?

(Circle One): Yes ☒ No Don't Know. IF you answered YES, then tell what it moved behind: \_\_\_\_\_

16. Did the object move in front of something at any time, particularly a cloud?

(Circle One): Yes ☒ No Don't Know. IF you answered YES, then tell what in front of: \_\_\_\_\_

17. Tell in a few words the following things about the object:

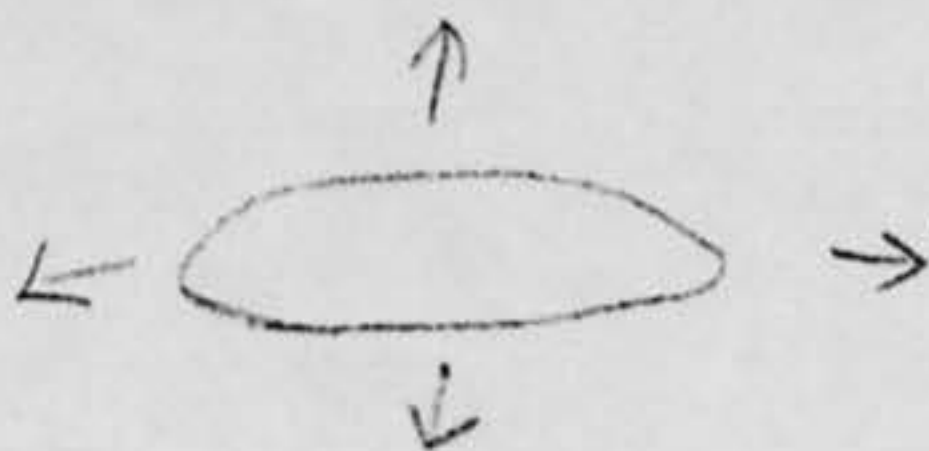
a. Sound was no sound

b. Color red white blue green

18. We wish to know the angular size. Hold a match stick at arm's length in line with a known object and note how much of the object is covered by the head of the match. If you had performed this experiment at the time of the sighting, how much of the object would have been covered by the match head?

Just about half of it.

19. Draw a picture that will show the shape of the object or objects. Label and include in your sketch any details of the object that you saw such as wings, protrusions, etc., and especially exhaust trails or vapor trails. Place an arrow beside the drawing to show the direction the object was moving.





30. Have you ever seen this, or a similar object before. If so give date or dates and location.

NO

31. Was anyone else with you at the time you saw the object? (Circle One)

Yes

No

31.1 IF you answered YES, did they see the object too? (Circle One)

Yes

No

31.2 Please list their names and addresses:

[REDACTED]  
[REDACTED]  
BELLBROOK OHIO 45305

32. Please give the following information about yourself:

NAME

[REDACTED]  
Last Name

[REDACTED]  
First Name

[REDACTED]  
Middle Name

ADDRESS

[REDACTED]  
Street

BELLBROOK  
City

Zone

OHIO  
State

TELEPHONE NUMBER

[REDACTED]  
AGE 13

SEX MALE

Indicate any additional information about yourself, including any special experience, which might be pertinent.

33. When and to whom did you report that you had seen the object?

26  
Day

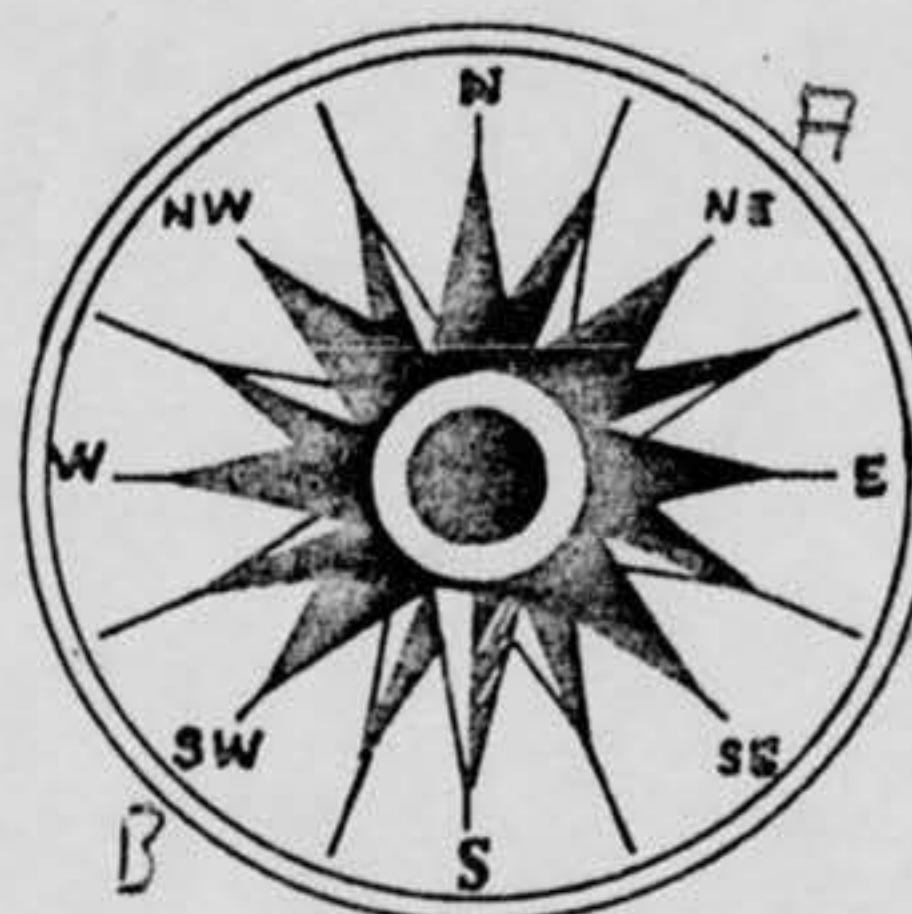
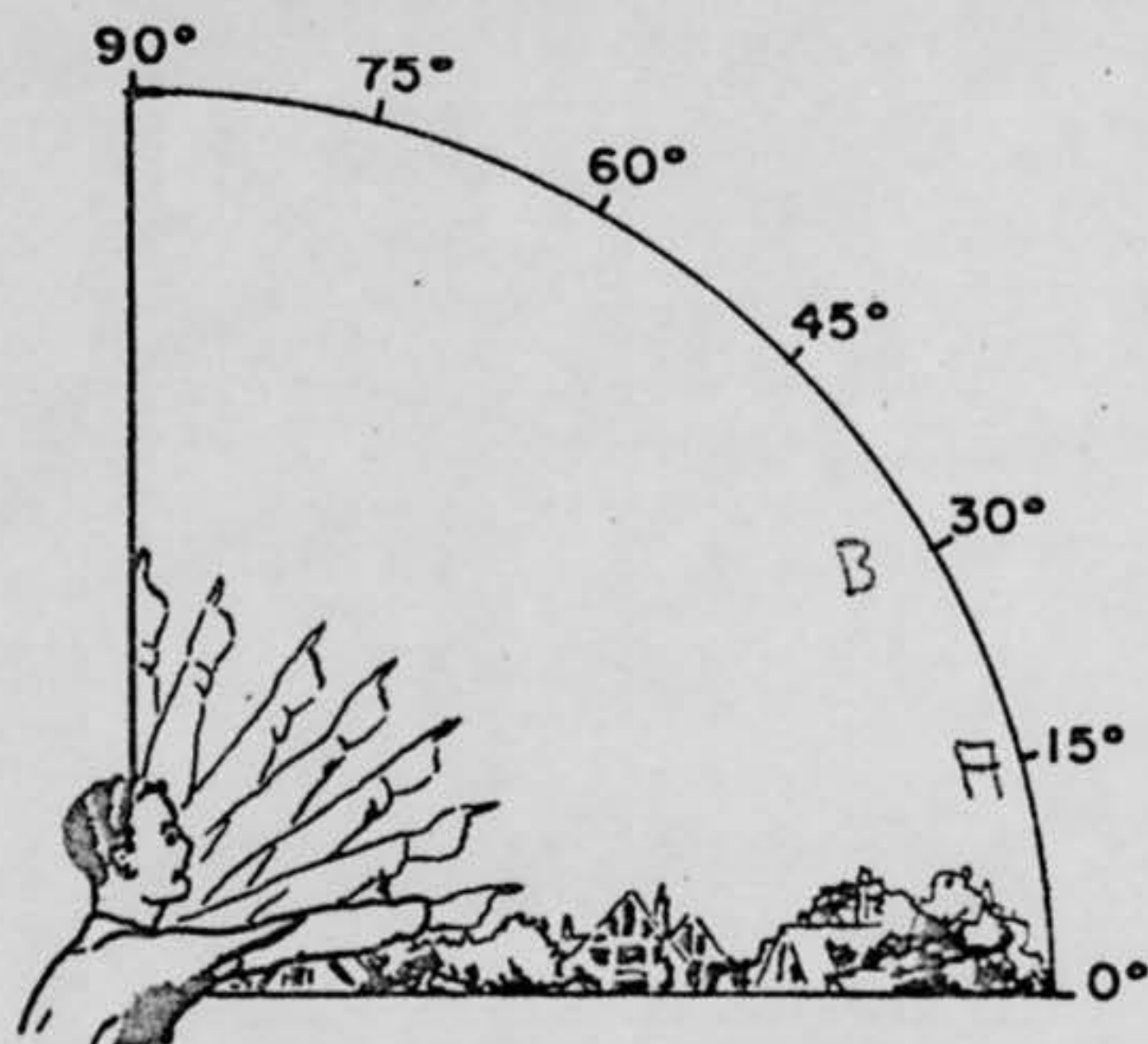
10  
Month

66  
Year

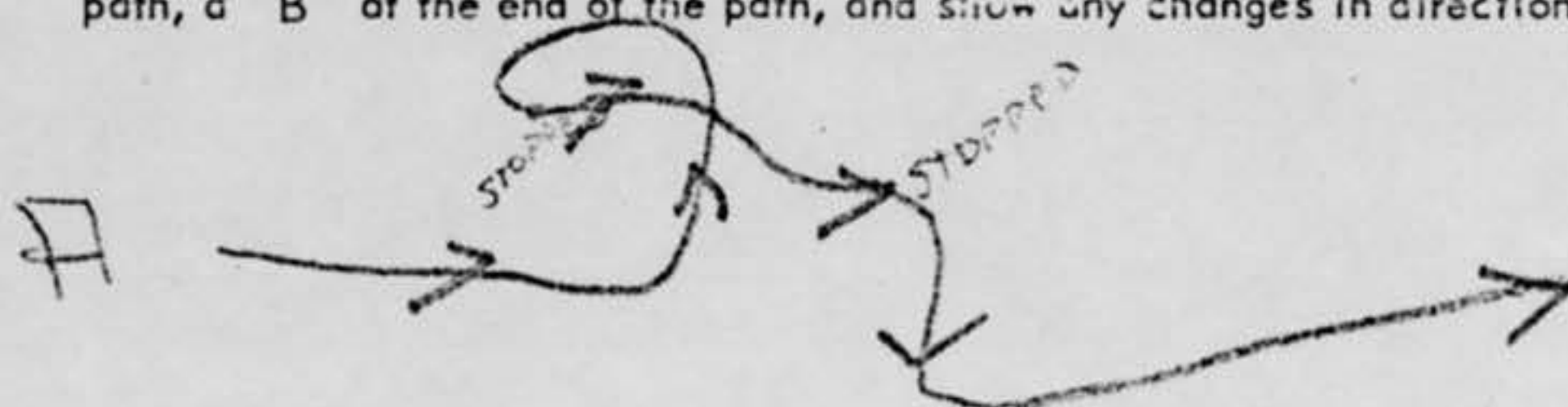
Wright-Patterson  
AFB OHIO



27. In the following sketch, imagine that you are at the point shown. Place an "A" on the curved line to show how high the object was above the horizon (skyline) when you *first* saw it. Place a "B" on the same curved line to show how high the object was above the horizon (skyline) when you *last* saw it. Place an "A" on the compass when you *first* saw it. Place a "B" on the compass where you *last* saw the object.



28. Draw a picture that will show the motion that the object or objects made. Place an "A" at the beginning of the path, a "B" at the end of the path, and show any changes in direction during the course.



29. IF there was MORE THAN ONE object, then how many were there? ONLY ONE OBJECT  
Draw a picture of how they were arranged, and put an arrow to show the direction that they were traveling.



34. Date you completed this questionnaire:

31

Day

10

Month

66

Year

35. Information which you feel pertinent and which is not adequately covered in the specific points of the questionnaire or a narrative explanation of your sighting.

The object seemed to have some form of intelligent life aboard. The object seemed to be surveying the plot around us, in a circular path or motion.



8. IF you saw the object at NIGHT, what did you notice concerning the STARS and MOON?

8.1 STARS (Circle One):

- a. None  
b. A few  
c. Many  
d. Don't remember

### 8.2 MOON (Circle One):

- a. Bright moonlight  
b. Dull moonlight  
c. No moonlight – pitch dark  
d. Don't remember

9. What were the weather conditions at the time you saw the object?

CLOUDS (*Circle One*):

- a. Clear sky
- b. Hazy
- c. Scattered clouds
- d. Thick or heavy clouds

WEATHER (Circle One):

- a. Dry
- b. Fog, mist, or light rain
- c. Moderate or heavy rain
- d. Snow
- e. Don't remember

10. The object appeared: (Circle One):

- a. Solid  
b. Transparent  
c. Vapor  
d. As a light  
e. Don't remember

11. If it appeared as a light, was it brighter than the brightest stars? (Circle One):

- a. Brighter  
b. Dimmer  
c. About the same  
d. Don't know

11.1 Compare brightness to some common object: ☉

Compare brightness to some common object:

Mercury vapor light

12. The edges of the object were:

(Circle One): a Fuzzy or blurred

- b. Like a bright star  
c. Sharply outlined  
d. Don't remember

e. Other \_\_\_\_\_

13. Did the object:

(Circle One for each question)

- a. Appear to stand still at any time?
- b. Suddenly speed up and rush away at any time?
- c. Break up into parts or explode?
- d. Give off smoke?
- e. Change brightness?
- f. Change shape?
- g. Flash or flicker?
- h. Disappear and reappear?

☒ Yes

No.

Don't know

~~Yes~~

No.

Don't know

Yes

~~NO~~

Don't know

Yes

No.

Don't know

**Yes**

No

Don't know

Yes

No

Don't know

**Yes**

No

Don't know

**Yes**

No

Don't know